CASEFLOW REQUEST

JD-CV-116 Rev. 1-16

STATE OF CONNECTICUT SUPERIOR COURT

www.jud.ct.gov



Instructions

- 1. Fill out all sections and file with the court.
- 2. File at least 3 days before the date of the scheduled event.

Note: If the request is granted, the court will try to schedule the event for the requested date. However, if that date is not available, it will be scheduled for the next available date.

| Name of case (First-named plaintiff v. First-named defendant) | | | | | |
|---|-----------------------------|--------------------|-----------------------|---|------------|
| Lionetti, Paul v. Western Connecticut State Univ | ersity | | | | |
| Judicial District of | | Date of request | | Date of scheduled event (if applicable) | |
| Bridgeport | | 4/11/2016 | | 04/15/2016 | |
| Name of Judge who scheduled the event (if applicable) | 0 | ocket number | | 0054075 | (0) |
| Honorable Dale W. Radcliffe | | FBT CV 15 | | - 6054375 | (S) |
| Requested Action ("X" box(es) that ap | ply and give reas | on(s) for reques | t below) | | |
| Status Conference on or about: 04/15 | 5/2016 . | | | | |
| Client/adjuster to be available by phon | e for | Event | schedul | ed on Date | - · |
| Pretrial on or about | | | | | |
| Party to be excused from | | scheduled | | • | |
| Other: | Event | | Date | | • |
| Reason(s) for request: | | | | | |
| Defendant requests to participate in the schedu | ling conference b | v telenhone. Cor | insel have con | ferred regarding the so | chedulina |
| Defendant requests to participate in the scheduling conference by telephone. Counsel have conferred regarding the scheduling order and are filing an agreed upon joint scheduling order. | | | | | |
| | | | | | |
| | | | | | |
| I agree to notify my client and all counsel of record and self-represented parties whether the requested action is granted or denied, and if granted, the specific ruling of the court. I have told all counsel and self-represented parties of record that I would be asking for the requested action. All Counsel and Self-represented Parties: | | | | | |
| ▼ Consent ☐ Do not consent to the action requested above | | | | | |
| Signed (Person making request) | Name 4366 | | imber or self-represe | nted party (Print or type) | , |
| The person requesting the action is the: Plaintiff Defendant | Attorney fo | or Plaintiff | X Attorney | | |
| Firm name (If applicable) Walter Menjivar | Address 55 Eim Street, H | artford, CT, 06106 | 3 | Telephone number (with area 8608085210 | a code) |
| I certify that a copy of the above was mailed or delivence is attached listing the name and address of each of the control of the certification. | | | | f-represented parties of | record. A |
| Signed (Individual attorney or self-represented party) | | | | Date 04/11/2016 | |
| Order | - | | | • | |
| Request is | Signed (Judge) | | | Date | |
| Granted Denied | | | | | |
| | • | | * | | |

ADA NOTICE

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA/